

# Town of Whitestown Department of Building and Planning 6210 Veterans Dr Whitestown, Indiana 46075

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# NEW RESIDENTIAL SINGLE-FAMILY & TWO- FAMILY HOME BUILDING PERMIT APPLICATION PACKET

This packet includes details for the documents needed to complete the application process for a new residential single-family or two-family home.

- Submit application and materials either by
  - E-mail: planning@whitestown.in.gov ----Please merge all documents and materials into one single PDF attachment in the order of the submittal checklist (Page 2).
  - In person: See Lauren Bailey in the Building and Planning Department at 6210 Veterans Dr. Whitestown, IN
  - Mail: Send application and materials to Building and Planning Department at 6210 Veterans Dr. Whitestown, IN
- Applications whose plans are larger than 11"x17" must be submitted entirely in electronic format (email, CD, or jump drive).

### A complete application includes:

- Application
- Drainage Permit
- Site Plan
- Energy Efficiency Certificate
- Notice of Demolition

- Proof of Sewer and Water Services
- Driveway Permit
- Erosion Control Plan
- Construction Plans

## **SUBMITTAL CHECKLIST**

Application: Fill out all applicable fields completely.
Parcel Number: Visit the Boone County GIS website www.boonecounty.in.gov for this 10-digit ID number. Click "GIS">"AGREE">Search by address or zoom in on the parcel to obtain the detailed information.
Proof of Sewer & Water Services: Proof of proper billing accounts are set up for sewer/water service. Contact Whitestown Utilities, 6210 Veterans Dr. Whitestown, IN, 765.733.8584.
Drainage Permit: Contact Boone County Surveyor, 116 W Washington St, Room 102, Lebanon, IN 46077, 317.483.4444.
Driveway Permit:
Local Roads: Town of Whitestown 6210 S. 100 E. Whitestown, IN 46075 County Roads: Boone County Highway Department 1955 Indianapolis Ave, Lebanon, IN 46052 State Roads: State Highway Department P.O. Box 667. Crawfordsville, IN 46933
Site Plan: ONE hard copy 8.5"x11"
Erosion Control Plan: 8.5"x11"
Energy Efficiency Certificate: 8.5"x11"
Construction Plans: ONE hard copy floor plans and a complete cross-section of the proposed structure 8.5"x11" and ONE hard copy 8.5"x11"

#### PERMIT FEES AND OTHER FEES

Fees are not paid until the permit has been issued and is ready for pick up.

#### **NEW SINGLE-FAMILY OR TWO-FAMILY HOME**

\$275 base fee + applicable inspections:

•	Temporary Electric	\$125
•	Footing or Slab/Foundation	\$125
•	Rough-in Electric	\$125
•	Rough-in Plumbing	\$125
•	Rough-in HVAC	\$125
•	Final	\$125

#### **PARK IMPACT FEE**

Beginning July 1, 2014, all new primary structures are required to pay a Park Impact Fee.

Single- Family......\$953
Two- Family......\$1,525 (\$715/unit)

#### **EDC FEE**

Per Ordinance 2005-23, all new primary structures are required to pay an Economic Development Fee.

Two- Family.....\$100 (\$50/unit)

<u>Failed inspections</u> will be assessed a respective re-inspection fee and must be paid prior to the final inspection or issuance of the Certificate of Occupancy.

<u>Beginning work without securing permits</u> will be assessed a fine of **twice** the calculated permit fee. Fine must be paid before a permit will be issued.

 Questions about inspections or code requirements can be directed to the Whitestown Building Inspector at 317.942.1553

nis application is being subm Residential Accessory			Permit Number: Permit Fee:	EDC Fee:	
Residential Accessory	C11 -				
	Residential Accessory Structure				
			Issued:	Expires:	
Date Application is Submitted:	Driveway Permit:	Drai	inage Permit #:	Sewer/Water Permit #:	
pplicant and Contact In	formation	<b> </b>			
Name of applicant:					
Address of applicant (street, city, state	e, zip):				
Contact person for the permit:					
Contact phone:		Contact en	Contact email:		
ontractor and Contact I	nformation				
Name of contractor:					
Address of contractor (street, city, sta	te, zip):				
Contact person:		Contact ph	Contact phone:		
ocation Information		- 1			
Address of location to be improved (st	reet, city, state, zip):				
Subdivision:		Section #:		Lot #:	
Parcel number:	<u>.</u>				
FOTAL structure area or area of work	(caft):				
of the structure area of area of work	(341.6).				
Living area: Garage		a: Other:			
Approximate total construction cost:					
e undersigned represents that such work s	shall start within 90 day uld said work not start i		·		